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Clauson KA, Seamon MJ, Clauson AS, Van TB. Evaluation of drug information databases for personal digital assistants. *Am J Health Syst Pharm* 2004 May 15;61(10):1015-24. [PMID:15160777].

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ABSTRACT: PURPOSE: Core and supplemental drug information databases available for use with personal digital assistants (PDAs) were evaluated. METHODS: Ten core (or standalone) databases, six drug interaction analyzers, and three dietary supplement databases used with the Palm and Pocket PC operating systems were selected for study. The databases were rated for scope (the absence or presence of an answer to a drug information question), completeness (the comprehensiveness of an answer), and ease of use (the number of hypertext links needed to reach the desired answer). A total of 14 weighted categories, consisting of 146 and 30 drug questions for the core and supplemental databases, respectively, were used to determine the overall scores. RESULTS: The best overall performers were, in order of total scores, Lexi-Drugs Platinum, Tarascon Pocket Pharmacopoeia, ePocrates Rx Pro, and Clinical Pharmacology OnHand. The databases with the lowest composite scores were Triple i Prescribing Guide and A2Z Drugs. CONCLUSION: Drug information databases for PDAs varied in scope, completeness, and ease of use. The results may help clinicians find the most appropriate product for their practice setting.

Bosinski TJ, Campbell L, Schwartz S. Using a personal digital assistant to document pharmacotherapeutic interventions. *Am J Health Syst Pharm* 2004 May 1;61(9):931-4. [PMID:15156969].

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Nagykaldi Z, Mold JW. Diabetes Patient Tracker, a personal digital assistant-based diabetes management system for primary care practices in Oklahoma. *Diabetes Technol Ther* 2003;5(6):997-1001. [PMID:14709203].

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ABSTRACT: It has been demonstrated that electronic patient registries combined with a clinical decision support system have a significant positive impact on the documentation and delivery of services provided by health care professionals. While

implementation of available commercial systems has not always been proven effective in a number of primary care practices, development and implementation of such a system in a practice-based research network might enhance successful implementation. Physicians in our practice-based research network (Oklahoma Physicians Resource/Research Network) initiated a project that aimed at designing, testing, and implementing a personal digital assistant-based diabetes management system. We utilized the "best practice" approach to determine the principles on which the application must operate. System development and beta testing were also accomplished based on the direct feedback of user clinicians. Practice Enhancement Assistants (PEAs) were available in the practices for assistance with implementation. Implementation of the Diabetes Patient Tracker (DPT) resulted in a significant improvement ($p < 0.05$) in nine of 10 diabetic quality of care measures compared with pre-intervention levels in 20 primary care practices. Regular PEA visits similarly increased the number of foot exams and retinal exams performed in the last year ($p = 0.03$ and 0.02 , respectively). DPT is a low-cost, feasible, easily implementable, and very effective paper-less tool that significantly improves patient care and documentation in primary care practices.

Fox GN, Moawad NS, Music RE. FIRSTConsult: A useful point-of-care clinical reference. J Fam Pract 2004 Jun;53(6):466-72. [PMID: 15189721].

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Dong P, Mondry A. Enhanced quality and quantity of retrieval of Critically Appraised Topics using the CAT Crawler. Med Inform Internet Med 2004 Mar;29(1):43-55. [PMID: 15204609].

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ABSTRACT: As healthcare moves towards the implementation of Evidence-Based Medicine (EBM), Critically Appraised Topics (CATs) become useful in helping physicians to make clinical decisions. A number of academic and healthcare organizations have set up web-based CAT libraries. The primary objective of the presented work is to provide a one-stop search and download site that allows access to multiple CAT libraries. A web-based application, namely the CAT Crawler, was developed to serve physicians with an adequate access to available appraised topics on the Internet. Important information is extracted automatically and regularly from CAT websites, and consolidated by checking the uniqueness and availability. The principle of meta-search is incorporated into the implementation of the search engine, which finds relevant topics following keyword input. The retrieved result directs the physician to the original resource page. A full-text article of a particular topic can be converted into a proper format for downloading to Personal Digital Assistant (PDA) devices. In summary, the application provides physicians with a common interface to retrieve relevant CATs on particular clinical topics from multiple resources, and thus speeds up the decision making process.